Part B - FEE(S) TRANSMITTAL

Complete and mail this form, together will all applicable fees, to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 Or Fax to (703) 746-4000 Instructions: This for should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notifications of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) petitying a newcorrespondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance feé notifications. Certificate of Mailing or Transmission Current Correspondence Address: FEB 2 3 2005 I hereby certify that this paper and all enclosures referred to therein are being deposited with the United States Postal Service with sufficient postage for first PATENT DEPARTMENT class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Skadden, Arps, Slate, Meagher & Flo Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below: **Four Times Square** Name: Michael McGuire New York, NY 10036 Date: February 17, 2005 Customer Number: 21637 Signature: ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR 09/511,645 02/22/2000 Paul Carl Kocher 003388.P001C [VAL-001 2228 CON-CON TITLE OF INVENTION: Apparatus and method for demonstrating and confirming the status of digital certificates an other data TOTAL FEES DUE **PUBLICATION FEE** DATE DUE APPLICATION TYPE SMALL ENTITY ISSUE FEE \$1400 2/18/2005 \$1400 \$0 NO Nonprovisional ART UNIT **CLASS-SUBCLASS** EXAMINER 2135 713-15800 Hua, Ly 1. Change of correspondence address or indication of "Fee Address" (37 CFR 2. For printing on the patent front page, list (1) the 1. Skadden, Arps, Slate, names of up to 3 registered patent attorneys or Meagher & Flom LLP agents OR, alternatively, (2) the name of a single Change of correspondence address (or Change of Correspondence form PTO/SB/122 attached. firm (having as a mem ber a registered attorney or agent) and the names of up to 2 registered patent "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47 attorneys or agents. If no name is listed, no name attached. will be printed. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type): Please Note: Unless an assignee is identified in Block 3, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE: (B) RESIDENCE: (City & State or Country) **Tumbleweed Communications Corp.** Redwood City, California Please check the appropriate assignee category indicated below: □ individual ⊠ corporation or other private group entity □ government 4b. Payment of Fee(s): 4a. The following fees are enclosed: □ A check in the amount of the fee(s) is enclosed. ■ Issue Fee □ Payment by credit card. Form PTO-2038 is attached. ☑ The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account No. __19-2385 of this form). Director for Patents is requested to apply the Issue Fee and Publication fee (if any) or to re-apply any previously paid Issue Fee to the application identified above. (Authorized signature) Guy Perry 46,194 February 17, 2005 Note: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and

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